

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

Write the full name of each plaintiff.

Billy Moncion

-against-

North Wellc Health  
Staten Island  
University Hospital

CV

(Include case number if one has been assigned)

COMPLAINT

Do you want a jury trial?

☐ Yes ☒ No

Write the full name of each defendant. If you need more space, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section II.

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NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

## I. BASIS FOR JURISDICTION

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation, and the amount in controversy is more than \$75,000, is a diversity case. In a diversity case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal-court jurisdiction in your case?

☒ Federal Question

☐ Diversity of Citizenship

### A. If you checked Federal Question

Which of your federal constitutional or federal statutory rights have been violated?

1983

### B. If you checked Diversity of Citizenship

#### 1. Citizenship of the parties

Of what State is each party a citizen?

The plaintiff, Betty Moncion, is a citizen of the State of  
(Plaintiff's name)

(State in which the person resides and intends to remain.)

or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of

If more than one plaintiff is named in the complaint, attach additional pages providing information for each additional plaintiff.

If the defendant is an individual:

The defendant, Northwell Health is a citizen of the State of  
(Defendant's name)

STATEN ISLAND UNIVERSITY HOSPITAL  
or, if not lawfully admitted for permanent residence in the United States, a citizen or  
subject of the foreign state of

If the defendant is a corporation:

The defendant, Northwell Health  
STATEN ISLAND HOSPITAL is incorporated under the laws of  
the State of NEW YORK

and has its principal place of business in the State of \_\_\_\_\_

or is incorporated under the laws of (foreign state) \_\_\_\_\_

and has its principal place of business in \_\_\_\_\_

If more than one defendant is named in the complaint, attach additional pages providing  
information for each additional defendant.

## II. PARTIES

### A. Plaintiff Information

Provide the following information for each plaintiff named in the complaint. Attach additional  
pages if needed.

Betty M Mencion  
First Name Middle Initial Last Name  
P.O. Box 90506 Brooklyn NY  
Street Address  
Brooklyn NY 11209  
County, City State Zip Code  
347 466-4034  
Telephone Number Email Address (if available)

## B. Defendant Information

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1:

STATEN ISLAND UNIVERSITY HOSPITAL  
 First Name Last Name

Current Job Title (or other identifying information)

475 SEAVIEW AVE. STATEN ISLAND

Current Work Address (or other address where defendant may be served)

STATEN ISLAND NY 10305  
 County, City State Zip Code

Defendant 2:

STATEN ISLAND UNIVERSITY HOSPITAL  
 First Name Last Name

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

County, City State Zip Code

Defendant 3:

STATEN ISLAND UNIVERSITY HOSPITAL  
 First Name Last Name

Current Job Title (or other identifying information)

475 SEAVIEW AVE. STATEN ISLAND

Current Work Address (or other address where defendant may be served)

STATEN ISLAND NY 10305  
 County, City State Zip Code

Defendant 4:

Northwell Health Staten Island  
First Name Last Name University Hospital

Current Job Title (or other identifying information)

475 Seaview Ave

Current Work Address (or other address where defendant may be served)

Staten Island NY

10305

County, City

State

Zip Code

### III. STATEMENT OF CLAIM

Place(s) of occurrence:

475 Seaview Ave Staten Island  
New York NY 10305

Date(s) of occurrence:

2/10/20 3-31/20 5-1/20

### FACTS:

State here briefly the FACTS that support your case. Describe what happened, how you were harmed, and what each defendant personally did or failed to do that harmed you. Attach additional pages if needed.

See Attached

See ATTACHE

#### INJURIES:

If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.

I WAS DISCRIMINATED BY THREE,  
DOCTOR FROM EMERGENCY ROOM.  
WHEN I GO THERE LOOK BY HELP,  
WITH MY HIGH BLOOD PRESSURE.  
WHEN I HAVE 214 OVER 150  
THEIR DON'T HELP.

#### IV. RELIEF

State briefly what money damages or other relief you want the court to order.

I SUED THE STATEN ISLAND UNIVERSITY HOSPITAL  
BY THE SUM 300,000  
BY DISCRIMINATION SUFFERING  
PAIN AND TRAUMA.

## V. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

12-18-20  
 Dated Betty M Moncion  
 First Name Middle Initial Last Name  
 Plaintiff's Signature

Street Address

County, City

State

Zip Code

Telephone Number

Email Address (if available)

I have read the Pro Se (Nonprisoner) Consent to Receive Documents Electronically:

☐ Yes ☒ No

If you do consent to receive documents electronically, submit the completed form with your complaint. If you do not consent, please do not attach the form.

(1)

To whom this may concern,

I'm writing this email explain my experiences in Staten Island University Hospital. (475 Seaview Ave Staten Island, NY 10305 United States)

I have been discriminated multiple times at this hospitals and will be suing.

Around February of 2020, I went to Staten Island university Hospital around 10PM because I was experiencing chest pain and my blood pressure was high.

In order to find out what was going on with me, they told me I would have to stay overnight. So when The nurse brings me to the room so I can stay over night, I realize there is a male sleeping in the same room. This was around when the pandemic started to reach us here in staten Island so I was worried about staying in that room. I asked the nurse if she could switch my room for two reasons, He was not wearing a mask, and I am a women and I did not feel comfortable sleeping in the same room as the male. After the nurse refused to switch my room, even though there were many empty rooms, I decided to leave the emergency room.

On March 31st I went to the same hospital around 11PM because my blood pressure was 220/100, It was high. The doctor told me there was nothing they can do and that it wasn't an emergency so I asked her If she can check my blood pressure again so she called in the nurse to take it. The nurse brings in the blood pressure machine from a room which has been used by a patient with COVID, I did not see her clean it so I asked her to clean it. When I asked her to clean it she told me I had to go or she would call the security So they called the security and they told me I had to leave. So they



(2)

kicked me out even though My blood pressure was high and I was feeling dizzy

The doctor who saw me that was is named Dimare, Michelle. She's the one who called security on me when I needed help the most. She said she didn't want me in the hospital.

May 1, 2020

I went to the emergency room again because of my high blood pressure

The doctor told me "why do you come to the emergency room" I told her because I feel very sick. She said "don't come to the emergency room anymore" she was discriminating me for no reason My blood pressure was past 200

Vasallo toms and towns, Kathleen are the two nurses that saw me this day. Salazar from emergency room also saw me this day.

December 8

I went to the same emergency room with a lot of pain. This doctor named jaimée O'Connor discriminated me. She kept giving me a dirty look and sent another doctor to see me. She also didn't want to give me any medicine even though I was in unbearable pain.

July 15,2020

I went to the same Hospital, feeling a lot of chest pain.

I told the lady in registration I had pain the day before in my chest and I felt dizzy

And the same day I felt a lot of pain in my chest it was coming and going

The lady was rude. I told her I didn't come here to fight I'm very sick and need help. I asked her if I can speak to a supervisor. She didn't want to call the supervisor, So someone else called them.mThe supervisor came so I explained what happened. The

(3)

supervisor and registration called security and they told security they didn't want me in there. I had to go back home with pain and dizzy and pain.

The same day you went to patient experience and I made a complain on what they did to me in the er

Victoria, took my complaint and she said she was going to investigate that.